MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 09/868632 **FILING DATE**

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1		1		
3		1		1		
4		1		1		
5		1		1		
6		①		1		
7		①		1		
8		①		2		
9		①		1		
10		①		1		
11		①				
12		①		1		
13		①		1		
14		①		1		
15		①		1		
16		①		1		
17		①		1		
18	1		1			
19		1		1		
20		1			1	
21		1		1		
22		1		1		
23		1		1		
24		①		1		
25		①		1		
26		①		1		
27		①		1		
28		①		1		
29		①		1		
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50						
TOTAL IND.			2			
TOTAL DEP.			32			
TOTAL CLAIMS			34			

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND	DEP.
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

PTO-1360 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS   U.S. DEPARTMENT OF COMMERCE